

**2014 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L11000075304

**Entity Name:** FINANCIAL HEALTH, LLC

**Current Principal Place of Business:**

4041 NW 9TH AVE  
SUITE 2  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

4041 NW 9TH AVE  
SUITE 2  
POMPANO BEACH, FL 33064 US

**FEI Number:** 45-2662163

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FRANCOIS, ONEL  
4041 NW 9TH AVE  
SUITE 2  
POMPANO BEACH, FL 33064 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** ONEL FRANCOIS

11/22/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title PRES  
Name FRANCOIS, ONEL  
Address 4041 NW 9TH AVE  
SUITE 2  
City-State-Zip: POMPANO BEACH FL 33064

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ONEL FRANCOIS

PRESIDENT

11/22/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date